FW-012  Order on Court Fee Walver After Reconsideration Hearing (Superior Court)	Clerk stamps date here when form is filed.
1 Name of person who asked the court to waive court fees:	
Street or mailing address:	
City: State: Zip:	
<b>2</b> Name of lawyer, if person in ① has one (name, address, phone number, e-mail, and State Bar number):	
	Fill in court name and street address:
	Superior Court of California, County of
The court made a previous fee waiver order in this case on (date):	
<b>4</b> ) The court sent you a notice to go to court about your fee waiver on ( <i>date</i> ):	
	Fill in case number and case name:  Case Number:
Read this form carefully. All checked $\overline{\square}$ boxes are court orders.	
There was a hearing on (date): in (Department):	Case Name:
The following people were at the hearing (check all that apply):  Person in 1 Lawyer in 2  Others (names):  After considering the information provided at the hearing, the court makes  a. No Change to Fee Waiver. The Order on Court Fee Waiver issued to remains in effect. No change is made at this time.	<u> </u>
b. Fee Waiver Is Ended as of (date): The court find longer eligible for a fee waiver because):	ds that beginning on that date you were no
(1) You must pay all court fees in this case from the date of this order.  (2) You must also pay the court \$ for fees that were initiall  (a) You must pay that amount within 10 days of this order.  (b) You may pay that amount in monthly payments of \$ and payable on the 1st of each month after that until paid in c.   Fee Waiver Is Retroactively Withdrawn. The court finds that you case because:	beginning (date):full. were never entitled to a fee waiver in this
(1) You must pay all court fees in this case from the date of this order.	
(2) You must also pay the court \$ for fees that the court in	nitially waived.
(a) $\square$ You must pay that amount within 10 days of this order.	<b>.</b>
(b) You may pay that amount in monthly payments of \$	
and payable on the 1st of each month after that until paid in	full.

	Case number:
Your name:	
	ds that you obtained the initial fee waiver in bad faith, for an improper costs of litigation. The court places the following limitations on the
(1) ☐ You must pay all court fees in this ca	ase from the date of this order.
(2) From the date of this order, only the You must pay for all court fees that	following court fees will be waived (court to check all that apply).  It are not checked below:
☐ Filing papers at superior court	☐ Making certified copies ☐ Giving notice and certificates
☐ Sheriff's fee to give notice	☐ Sending papers to another court department
☐ Court-appointed interpreter	☐ Court-appointed interpreter fees for a witness
Reporter's daily fee (up to 60 days after date of fee waiver)	Reporter's daily fees (beyond 60 days after the fee waiver)
$\square$ Jury fees and expenses	☐ Fees for a peace officer to testify in court
☐ Court-appointed expert's fees	☐ Court fees for telephone hearings
☐ Other (specify):	
(3) \( \sum \) Other modification:	
Date:	
S	ignature of Judge or Judicial Officer
	Certificate of Service
I certify that I am not involved in this case and (che	eck one): A certificate of mailing is attached.  Orney, if any, listed in 1 and 2, at the court, on the date below.
	othe party and attorney, if any, at the addresses listed in <b>1</b> and <b>2</b> , , California on the date below.
- · · · -	Clerk by Deputy